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PTO/SB/01 (12-97)

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**☐ Declaration Submitted with Initial Filing
☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
OR

Attorney Docket Number TSRI 651.1

First Named Inventor Cheresh

COMPLETE IF KNOWN

Application Number /

Filing Date 28 MAY 1999

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Methods and Compositions Useful for Modulation of Angiogenesis
Using Tyrosine Kinase Src

the specification of which (Title of the Invention)

☐ is attached hereto
OR☒ was filed on (MM/DD/YYYY) 05/28/1999 as United States Application Number or PCT International

Application Number PCT/US99/11780 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/087,220	05/29/1998	

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.**DECLARATION — Utility or Design Patent Application**

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☐ Customer Number → ☐ Registered practitioner(s) name/registration number listed below

Place Customer
Number Bar Code
Label here

Name	Registration Number	Name	Registration Number
Arne M. Olson	30,203	Michael A. Hierl	29,807
Dolores T. Kenney	31,269	Talivaldis Cepuritis	20,818
Seymour Rothstein	19,369	Daniel J. Deneufbourg	33,675

☒ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label OR ☒ Correspondence address below


Name	<u>TALIVALDIS CEPURITIS</u>				
Address	<u>OLSON & HIERL, LTD.</u>				
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname	
<u>David A.</u>		<u>Cheresh</u>	
Inventor's Signature	<u>David A. Cheresh</u>	Date	<u>6/22/99</u>
Residence: City	<u>Encinitas</u>	State	<u>CA</u>
		Country	<u>US</u>
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Post Office Address			
City	<u>Encinitas</u>	State	<u>CA</u>
		ZIP	<u>92024</u>
		Country	<u>US</u>

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>1</u>
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Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
<u>2-00</u> <u>Brian</u>				<u>Eliceiri</u>			
Inventor's Signature	<u>Brian</u>			<u>Eliceiri</u>		Date	<u>6/22/99</u>
Residence: City	<u>Carlsbad</u>	State	<u>CA</u>	Country	<u>US</u>	Citizenship	<u>US</u>
Post Office Address	<u>3104 Hataca Road</u>						
Post Office Address							
City	<u>Carlsbad</u>	State	<u>CA</u>	ZIP	<u>92009</u>	Country	<u>US</u>
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
<u>3-00</u> <u>Pamela L.</u>				<u>Schwartzberg</u>			
Inventor's Signature	<u>Pamela L. Schwartzberg</u>					Date	<u>9-6-99</u>
Residence: City	<u>Bethesda</u>	State	<u>MD</u>	Country	<u>US</u>	Citizenship	<u>US</u>
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Post Office Address							
City	<u>Bethesda</u>	State	<u>MD</u>	ZIP	<u>20814</u>	Country	<u>US</u>
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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DECLARATION**REGISTERED PRACTITIONER
INFORMATION
(Supplemental Sheet)**

Name	Registration Number	Name	Registration Number
Steven D. Weseman	41,372		
Timothy L. Harney	38,174		
Mark Chao	37,293		
Joseph M. Kuo	38,943		
James C. Haight	25,588		
David R. Sadowski	32,808		
Robert Benson	33,612		
Jack Spiegel	34,477		
Susan S. Rucker	35,762		
Steven M. Ferguson	38,448		
Stephen L. Finley	36,357		
John Peter Kim	38,514		

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